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CENTRAL FAX CENTER**FEB 20 2007****FAX TRANSMISSION****DATE:** February 20, 2007**PTO IDENTIFIER:** Application Number 10/823,089-Conf. #3168

Patent Number

Inventor: Signe E. Varner et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** EDWARDS ANGELL PALMER & DODGE LLP

Lisa Swiszez Hazzard

PHONE: (617) 439-4444**Attorney Dkt. #:** 56086-CON2 (71699)**PAGES (Including Cover Sheet):** 11**CONTENTS:** Amendment Transmittal (1 page);
Response to Office Action and Notice of Non-Compliant (8 pages);
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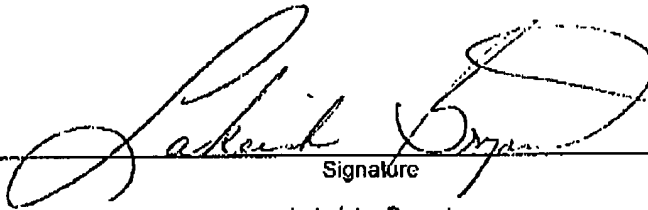
Application No. (if known): 10/823,089

Attorney Docket No.: 56086CON2 (71699)

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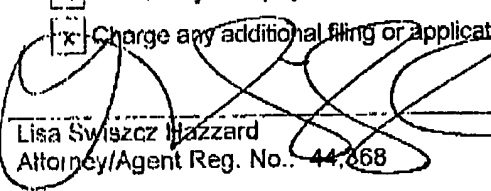
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Amendment Transmittal (1 page);

Response to Office Action and Notice of Non-Compliant (8 pages).

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AMENDMENT TRANSMITTAL LETTER				Docket No. 56086CON2 (71699)	
Application No. 10/823,089-Conf. #3168	Filing Date April 12, 2004	Examiner B. Huh	Art Unit 3767		
Applicant(s): Signe E. Varner et al.					
Invention: DEVICES FOR INTRAOCULAR DRUG DELIVERY					
TO THE COMMISSIONER FOR PATENTS					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	24	- 24 =	0	x 50.00	0.00
Independent Claims	3	- 3 =	0	x 200.00	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input checked="" type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-1105</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Lisa Swiszczy Hazzard Attorney/Agent Reg. No. 44,868					Dated: <u>February 20, 2007</u>
EDWARDS ANGELL PALMER & DODGE LLP P.O. Box 55874 Boston, Massachusetts 02205 (617) 439-4444					

Attorney Docket No. 56086CON2 (71699)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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FEB 20 2007

In re the application of: Varner et al.

Application No.: 10/823,089

Examiner: Benjamin Huh

Filed: April 12, 2004

Group Art Unit: 3767

For: DEVICES FOR INTRAOCULAR DRUG DELIVERY

RESPONSE TO OFFICE ACTION AND NOTICE OF NON-COMPLIANT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This communication is filed in response to the Office Action of July 24, 2006 and Notice of Non-Compliant of February 9, 2007.

Amendments to the claims begin on page 2.

Remarks begin on page 6.